



810-117

DOCKET NO.: 40736



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of: Dennis L. Panicali, et al

Serial No.: 07/579,269

Group No.: 187 1813

Filed: 9/5/90

Examiner: D. Barnd

For: RECOMBINANT POX VIRUS FOR IMMUNIZATION AGAINST ANTIGENS



COMMISSIONER OF PATENTS AND TRADEMARKS
Washington, DC 20231

PETITION AND FEE FOR EXTENSION OF TIME
AND
AMENDMENT TRANSMITTAL

1. Transmitted herewith is an amendment for this application.

STATUS

2. Applicant is
_____ a small entity -- verified statement:
_____ attached.
_____ already filed.
X other than a small entity.

3. This is a petition for an extension of the time for a total period of 3 months.
(check and complete the application item below)
X to respond to the Office Letter mailed on December 12, 1991
X for amendment to the claims
(indicate matter being extended)

CERTIFICATE OF MAILING 37 CFR 1.8a

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to the:

COMMISSIONER OF PATENTS AND TRADEMARKS, Washington, DC 20231

Adele E. Stone

(Type or print name of person mailing paper)

Date: 6/12/92

Adele E. Stone
(Signature of person mailing paper)

(a) Extension requested (check below the total number of months of extension requested):

Extension (months)	Fee for other than small entity	Fee for small entity
one month	\$100.00	\$50.00
two months	\$300.00	\$150.00
<u>x</u> three months	\$750.00 810.00	\$365.00
four months	\$1,150.00	\$575.00
Fee		\$ 810.00

(check and complete the next item, if applicable)

An extension for _____ months has already been secured and the fee paid therefor of \$_____ is deducted from the total fee due for the total months of the new extension is requested.

Extension fee due with this request \$ 810.00

(b) _____ Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

FEE FOR CLAIMS

4. The fee for claims has been calculated as shown below:

(COL. 1)		(COL. 2)		SMALL ENTITY		OTHER THAN A SMALL ENTITY	
CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDIT. FEE	OR	ADDIT. FEE
TOTAL *	MINUS **	=	x 10 =	\$		x 20 =	\$
INDEP. *	MINUS ***	=	x 30 =	\$		x 60 =	\$
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				+100 =	\$	+ 200 =	\$
TOTAL				\$		OR TOTAL	\$
ADDIT. FEE				\$			

* If the entry in Col. 1 is less than entry in Col. 2, write "0" in Col. 3.

** If the "Highest No. Previously Paid for" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest No. Previously Paid for" IN THIS SPACE is less than 3, enter "3".

The "Highest No. Previously Paid for" (Total or Indep.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

(complete (c) or (d) as applicable)

(c) No additional fee is required
or

(d) x Total additional fee required \$ 810.00

5. FEE PAYMENT

 x Attached is a check in the sum of \$ 810.00

 Charge Account No. the sum of \$

A duplicate of this transmittal is attached.

6. FEE DEFICIENCY

 x If any additional extension fee is required, charge
Account No. 04-1105.

AND/OR

 x If any additional fee for claims is required, charge
Account No. 04-1105.

Reg. No. 30,628

Tel. No. (617) 523-3400


SIGNATURE OF ATTORNEY

Ronald I. Eisenstein

Type or print name of attorney
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